

New Community Partner Interest Form

Note: Vendors or service providers who wish to contract with DCPS are not community partners

Name of Organization:

Contact Person: (name and title)

Phone:

Email:

(Please attach any supporting documentation that will help us to understand your organization. And your experience with similar school systems.)

Type of community partner (select one):

Sports Franchise	Foundation	Civic Association
Armed Forces	Business	Service Organization (ex. Rotary Club)
Nonprofit	College/University	Embassy
Fed'l Govt. Agency	DC Government Agency	Fraternity/Sorority
Trade Association	Parent Group/PTA	Other _____

Activities/Resources (select all that apply):

<input type="checkbox"/> Volunteers	<input type="checkbox"/> Scholarships/awards	<input type="checkbox"/> Internships/summer jobs
<input type="checkbox"/> Donations (financial)	<input type="checkbox"/> *Capital Improvements	<input type="checkbox"/> Trips/Events
<input type="checkbox"/> Tutors	<input type="checkbox"/> Mentors	<input type="checkbox"/> In-school performances
<input type="checkbox"/> Out-of-school performances	<input type="checkbox"/> Guest Speakers	<input type="checkbox"/> Technical expertise
<input type="checkbox"/> Contests	<input type="checkbox"/> *Donations (in kind)	<input type="checkbox"/> Other _____

Note:

**Capital improvements include painting, landscaping, etc.*

**In-kind donations refer to any non cash donation. (ex. furniture, food, computers, instruments, uniforms)*

Target group (select all that apply):

<input type="checkbox"/> Elementary (preK-2)	<input type="checkbox"/> Middle School (6-8)	<input type="checkbox"/> Parents
<input type="checkbox"/> Elementary (3-5)	<input type="checkbox"/> High School (9-12)	<input type="checkbox"/> Teachers

Please return this completed form to:

Community Partnerships

Email: dcpspartnerships@dc.gov or Fax: 202.442.5026